STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

as required by SDCL § 17-2-2.5

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: Timber Lake Topic		2. DATE: 10-22-15
3. FREQUENCY OF ISSUE: weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 51	3B. ANNUAL SUBSCRIPTION PRICE $ 37 and #41
4. COMPLETE PHYSICAL ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 806 Main St. Timber Lake SD 57656		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): PO Box 10 Timber Lake SD 57656		
6. FULL NAME OF PUBLISHER:		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME: Kathy Nelson	COMPLETE MAILING ADDRESS: PO Box 10 Timber Lake SD 57656	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.: None		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	1135	1082
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies.	37	60
2. Mail Subscription (Paid and or requested)	1082	1066
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	1119	1126
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	43	14
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1125	1140
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	10	10
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	1135	1150

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Kathy Nelson
(Signature)

(Title)

State of South Dakota

County of Perkins

(Seal)

JENNIFER BOLLINGER NOTARY SEAL PUBLIC STATE OF SOUTH DAKOTA

Sworn to before me this 22nd day of Oct., 2015

Jennifer Bollinger
Notary Public

My commission expires: 12/11/19

Form: SOS REC 051 3/2015

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DEC 28 2015
S.D. SEC. OF STATE